FEDERAL COMMUNICATIONS COMMISSION Washington, DC 20554

Approved by OMB 3060-0076 Est. time per response: 1 hour

COMMON CARRIER ANNUAL EMPLOYMENT REPORT

[Please read instructions before completing and for Notice regarding public burden.]

SECTION 1 - General Inform	mation				p 10000 1000	n to a delibria del	ore complet	ong and for 14	ouce regarding	public burd	en.j							
1. Name and Mailing Address BVU Authority 15022 Lee Hwy Bristol, VA 242	y	espondent												is a	eck here if this a change of dress.			
2. Year Report Filed 2017			Reporting Period (Ending Date of Pay Period Covered by Report) 03/26/2017						of Full-Time En g Period (check ewer than 16 (c g or more (come									
SECTION II - Full-Time Emp	oloyee	s,						0. 🔲 10	or more (com	plete all sec	tions)							
Job Categories			Number of Employees (Report employees in only one category)															
			Race/Ethnicity															
		Hispanic or Not-Hispanic									or Latino Total							
						Mal	e					Fem	ale			Columns A - N		
		Male	Female	White	Black or African American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or more races	White	Black or African American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or more races			
		Α	В	С	D	Ε	F	G	н	15	J	к	L	М	N	0		
Executive/Senior Level Officials and Managers	1.1													0.00,11	110	0		
First/Mid-Level Officials and Managers	1.2															0		
Professionals	2				-											0		
Technicians	3															0		
Sales Workers	- 4															0		
Administrative Support Workers	5															0		
Craft Workers	6															0		
Operatives	7															0		
Laborers and Helpers	8															0		
Service Workers	9															0		
TOTAL	10	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
PREVIOUS YEAR TOTAL	11															0		

		Number of Employees (Report employees in only one category)																
Job		Race/Ethnicity																
Categories	Hispanic or			Not-Hispanic or Latino														
		Li	atino			Ma	ale			Female						Total Columns		
		Male	Female B	White	Black or African American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or more races	White	Black or African American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or more races	A-N		
		A																
Executive/Senior Level Officials and Managers	1,1															0		
First/Mid-Level Officials and Managers	1.2															0		
Professionals	2															0		
Technicians	3															0		
Sales Workers	4															0		
Administrative Support Workers	5															0		
Craft Workers	6															0		
Operatives	7															0		
Laborers and Helpers	8															0		
Service Workers	9															0		
TOTAL	10	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
PREVIOUS YEAR TOTAL	11															0		
SECTION IV - Report of Disc	rimina	stion Compl	aints Pursuar	nt to 47 CFR	22 321, 23 5	5. 90 168 101	4 and 101	311										
This is to advise to company before a This is to advise to (Attach a list indice	he Co iny bo he Co	mmission the dy having co mmission tha	at no complain impetent jurisd at the following	ts regarding liction in suc	violations of the high matters during alleging violations	ne equal emplo	ryment provi	isions of Feder ed by this repo	ort. Ament oppostu	nity statuta	hour bear file	d against this	0.0000000000000000000000000000000000000					
SECTION V - Certification certify that to the best of my k	nowle	dge, informa	ition, and belie	f, all stateme	ents in this rep	ort are true an	d correct.					-0.00						
Date		and the second second second	Name of Perso				Signature							Telephone No.				
05/08/2017	Do	nald Bo	wman		1 Saune								(276) 821-6100					
Title of Person Signing Chief Executive Officer					WILLFULLY FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (18 U.S.C. 1001) AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (47 U.S.C. 312 (A)(1) AND/OR FORFEITURE (47 U.S.C. 503).													